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## **BIB DATA SHEET**

## **CONFIRMATION NO. 3529**

## 10/595,611    O6/15/2006   TO5   3686   P07558US00	SERIAL NUMBER	MBER   FILING or 3		CLASS		<b>GROUP ART UNIT</b>		ATTORNEY DOCKET		
APPLICANTS Michael David Buist, Victoria, AUSTRALIA;  ***********************************	10/595,611			705		3686				
Michael David Buist, Victoria, AUSTRALIA;  ***********************************		RUL	E							
This application is a 371 of PCT/AU04/01499 10/29/2004  ***FOREIGN APPLICATIONS**** AUSTRALIA 2003905954 10/29/2003  ***IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 12/16/2006  Foreign Priority claimed										
AUSTRALIA 2003905954 10/29/2003  *** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 12/16/2006  Foreign Priority claimed	** <b>CONTINUING DATA</b> ***********************************									
12/16/2006   Foreign Priority claimed   Yes   No   Met after Allowance   Total CLAIMS   Australia   No   Met after COUNTRY   Australia   No   Met after No   No   No   Met after No   No   No   No   No   No   No   No	** FOREIGN APPLICATIONS ************************************									
ADDRESS  MCKEE, VOORHEES & SEASE, P.L.C. 801 GRAND AVENUE SUITE 3200 DES MOINES, IA 50309-2721 UNITED STATES  TITLE  System and process for facilitating the provision of health care  FILING FEE RECEIVED 2191  Red after Allowance AUSTRALIA  DRAWINGS CLAIMS CLAIMS  CLAIMS AUSTRALIA  10  68  4   COUNTRY AUSTRALIA  AUSTRALIA  10  AUSTRALIA  AUSTRALIA  10  AUSTRALIA  AUSTRALIA  10  AUSTRALIA  AUSTRALIA  10  AUSTRALIA  A	** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 12/16/2006									
Verified and Acknowledged	Foreign Priority claimed	•	☐ Met af	ter			_			
MCKEE, VOORHEES & SEASE, P.L.C. 801 GRAND AVENUE SUITE 3200 DES MOINES, IA 50309-2721 UNITED STATES  TITLE  System and process for facilitating the provision of health care  FILING FEE RECEIVED 2191  MCKEE, VOORHEES & SEASE, P.L.C. 801 GRAND AVENUE SUITE 3200 DES MOINES, IA 50309-2721 UNITED STATES  TITLE  System and process for facilitating the provision of health care    All Fees     1.16 Fees (Filing)     1.17 Fees (Processing Ext. of time)     1.18 Fees (Issue)     Other	Verified and /RAJI\	/ J RAJ/	■ Allowa	ance						
801 GRAND AVENUE SUITE 3200 DES MOINES, IA 50309-2721 UNITED STATES  TITLE  System and process for facilitating the provision of health care  FILING FEE RECEIVED 2191  PEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:    All Fees     1.16 Fees (Filing)     1.17 Fees (Processing Ext. of time)     1.18 Fees (Issue)     Other	ADDRESS									
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RECEIVED 2191  No to charge/credit DEPOSIT ACCOUNT No for following:  \[ \begin{align*} \text{U 1.17 Fees (Processing Ext. of time)} \\ \text{U 1.18 Fees (Issue)} \\ \text{U Other} \]						☐ 1.16 F	☐ 1.16 Fees (Filing)			
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		No for following:					1.18 Fees (Issue)			
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